

FEBRUARY 19, 2008

MICHAEL W. DOBBINS  
CLERK, U.S. DISTRICT COURT

10/10/2007

UNITED STATES DISTRICT COURT FOR THE  
NORTHERN DISTRICT OF ILLINOISIN FORMA PAUPERIS APPLICATION  
AND  
FINANCIAL AFFIDAVITMaria Flagg  
Plaintiff

v.

Advocate Health  
Defendant(s)

CASE NUMBER

08 C 999

JUDGE

JUDGE LEINENWEBER  
MAGISTRATE JUDGE COLE

Wherever ☐ is included, please place an X into whichever box applies. Wherever the answer to any question requires more information than the space that is provided, attach one or more pages that refer to each such question number and provide the additional information. Please PRINT:

I, Maria Flagg, declare that I am the ☒ plaintiff ☐ petitioner ☐ movant (other \_\_\_\_\_) in the above-entitled case. This affidavit constitutes my application ☒ to proceed without full prepayment of fees, or ☐ in support of my motion for appointment of counsel, or ☐ both. I also declare that I am unable to pay the costs of these proceedings, and that I am entitled to the relief sought in the complaint/petition/motion/appeal. In support of this petition/application/motion/appeal, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☐ Yes ☒ No (If "No," go to Question 2)  
I.D. # \_\_\_\_\_ Name of prison or jail: \_\_\_\_\_  
Do you receive any payment from the institution? ☐ Yes ☐ No Monthly amount: \_\_\_\_\_
2. Are you currently employed? ☒ Yes ☐ No  
Monthly salary or wages: 2500  
Name and address of employer: Northwestern Memorial Hospital,  
251 E. Huron St Chicago IL 60611  
  - a. If the answer is "No":  
Date of last employment: \_\_\_\_\_  
Monthly salary or wages: \_\_\_\_\_  
Name and address of last employer: \_\_\_\_\_
  - b. Are you married? ☐ Yes ☒ No  
Spouse's monthly salary or wages: \_\_\_\_\_  
Name and address of employer: \_\_\_\_\_
3. Apart from your income stated above in response to Question 2, in the past twelve months have you or anyone else living at the same residence received more than \$200 from any of the following sources? Mark an X in either "Yes" or "No", and then check all boxes that apply in each category.
  - a. Salary or wages ☐ Yes ☒ No  
Amount \_\_\_\_\_ Received by \_\_\_\_\_

- b. ☐ Business, ☐ profession or ☐ other self-employment ☐ Yes ☒ No  
Amount \_\_\_\_\_ Received by \_\_\_\_\_
- c. ☐ Rent payments, ☐ interest or ☐ dividends ☐ Yes ☒ No  
Amount \_\_\_\_\_ Received by \_\_\_\_\_
- d. ☒ Pensions, ☐ social security, ☐ annuities, ☐ life insurance, ☐ disability, ☐ workers' compensation, ☒ unemployment, ☐ welfare, ☐ alimony or maintenance or ☐ child support  
Amount \$100 - 401K ☒ Yes ☐ No  
\$9,282 unemployment Received by Maria Flagg
- e. ☐ Gifts or ☐ inheritances ☐ Yes ☒ No  
Amount \_\_\_\_\_ Received by \_\_\_\_\_
- f. ☐ Any other sources (state source: \_\_\_\_\_) ☐ Yes ☒ No  
Amount \_\_\_\_\_ Received by \_\_\_\_\_
4. also see Addendum  
Do you or anyone else living at the same residence have more than \$200 in cash or checking or savings accounts? ☐ Yes ☒ No Total amount: \_\_\_\_\_  
In whose name held: \_\_\_\_\_ Relationship to you: \_\_\_\_\_
5. see Addendum  
Do you or anyone else living at the same residence own any stocks, bonds, securities or other financial instruments? ☐ Yes ☒ No  
Property: \_\_\_\_\_ Current Value: \_\_\_\_\_  
In whose name held: \_\_\_\_\_ Relationship to you: \_\_\_\_\_
6. see Addendum  
Do you or anyone else living at the same residence own any real estate (houses, apartments, condominiums, cooperatives, two-flats, three-flats, etc.)? ☐ Yes ☒ No  
Address of property: \_\_\_\_\_  
Type of property: \_\_\_\_\_ Current value: \_\_\_\_\_  
In whose name held: \_\_\_\_\_ Relationship to you: \_\_\_\_\_  
Amount of monthly mortgage or loan payments: \_\_\_\_\_  
Name of person making payments: \_\_\_\_\_
7. See Addendum  
Do you or anyone else living at the same residence own any automobiles, boats, trailers, mobile homes or other items of personal property with a current market value of more than \$1000? ☒ Yes ☐ No  
Property: 1999 Plymouth Voyager  
Current value: \$4,500  
In whose name held: Maria Flagg Relationship to you: \_\_\_\_\_
8. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute monthly to their support. If none, check here ☐ No dependents  
Ivanna Russell - 100%  
Elijah Flagg - 100%

I declare under penalty of perjury that the above information is true and correct. I understand that pursuant to 28 U.S.C. § 1915(e)(2)(A), the court shall dismiss this case at any time if the court determines that my allegation of poverty is untrue.

Date: 2-15-2008

Maria N. Flagg  
Signature of Applicant  
Maria N. Flagg  
(Print Name)

**NOTICE TO PRISONERS:** A prisoner must also attach a statement certified by the appropriate institutional officer or officers showing all receipts, expenditures and balances during the last six months in the prisoner's prison or jail trust fund accounts. Because the law requires information as to such accounts covering a full six months before you have filed your lawsuit, you must attach a sheet covering transactions in your own account--prepared by each institution where you have been in custody during that six-month period--and you must also have the Certificate below completed by an authorized officer at each institution.

**CERTIFICATE**  
**(Incarcerated applicants only)**  
**(To be completed by the institution of incarceration)**

I certify that the applicant named herein, \_\_\_\_\_, I.D.# \_\_\_\_\_, has the sum of \$ \_\_\_\_\_ on account to his/her credit at (name of institution) \_\_\_\_\_.

I further certify that the applicant has the following securities to his/her credit: \_\_\_\_\_. I further certify that during the past six months the applicant's average monthly deposit was \$ \_\_\_\_\_.

(Add all deposits from all sources and then divide by number of months).

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF AUTHORIZED OFFICER

\_\_\_\_\_  
(Print name)

**MARIA FLAGG v. ADVOCATE HEALTH AND INC.**


**Addendum to In Forma Pauperis Application – supplemental responses  
to Questions 3-7**

Maria Flagg temporarily lives with Tommie and Alma Russell, the paternal grandparents of her children in their home at 9225 S. Justine Ave. in Chicago. She has resided with them since October, 2007 and plans to move out on her own in April 2008. She does not have detailed information about the income and assets of her children's grandparents. She asked them to give her information about their income and assets and they declined to provide the information. She knows that they own the home in which they live but does not know how much equity they have in the home or anything about the mortgage on the home. She also knows that Alma receives monthly social security checks but does not know the amount of the checks. She knows that Tommie receives a pension check and a social security check each month, but does not know the amount of either.

Ms. Flagg pays \$200 per month in rent to the Russells and they do not give her any money. Ms. Flagg pays for the food for herself and her children. Her finances and expenses are separate and apart from the finances and expenses of the Russells.

I declare under penalty of perjury that the above information is true and correct. I understand that pursuant to 28 U.S.C. § 1915 (e)(2)(A), the court shall dismiss this case at any time if the court determines that my allegation of poverty is untrue.

2/14/2008  
Date

  
\_\_\_\_\_  
Maria Flagg